



PATIENT EDUCATION

Sexual health and intimacy during and after radiation

A plain-language guide for patients and families. Bring this to your visit. It does not replace advice from your clinician.

This subject belongs in clinic

Radiation near the pelvis, breast, prostate, or other intimate areas — and the stress of any cancer course — can change desire, comfort, erections, vaginal moisture, orgasm, or how you feel in your body. None of this is a character flaw. You may ask a clinician of the gender you prefer, or bring a partner, or ask alone. You can also skip details you do not want to share.

What you may notice

- Pain with penetration, dryness, or a sense of tightness after pelvic treatment
- Erection changes after prostate or pelvic care
- Less desire during fatigue, pain, or sadness — this often lifts as energy returns
- Feeling unattractive because of scars, tubes, or hair change

What often helps

Time, lubrication (water-based unless told otherwise), longer warm-up, and positions that avoid pressure on a sore field. Pelvic-floor or sexual-health therapy can help pain and tightness. Medicines for erection or vaginal health exist — they need a prescription review. Intimacy is more than intercourse; closeness still counts.

Where CureRays may fit. Ask when it is physically safe to resume sexual activity for your surgery and radiation field. If you could become pregnant, we will talk about contraception during treatment. Confirm products and medicines with your care team. You will not shock us by asking.

Respect and privacy

We will not discuss this in a hallway. You may request a private room and a chaperone. Partners are welcome if you want them there. Your sexual orientation and relationship style are respected here.



Practical tips

- **Pain is a stop sign.** Do not push through tearing or heavy bleeding.
- **Skin field.** Avoid friction on healing skin or a fresh graft.
- **Dilators or moisturizers** after some gynecologic radiation — only on the schedule you are taught.
- **Alcohol** is not a reliable “solution” and can worsen erection or mood.

When to call the clinic

- Heavy bleeding, severe pain, fever, or a wound that opens
- Symptoms of a urine or yeast infection after intimacy
- Erection pain that does not resolve, or a prolonged erection if you use those medicines
- Distress, relationship strain, or questions you could not ask in the room — call and ask for a private return visit

Questions to ask

- When is sexual activity safe for my field and any surgery?
- Which lubricant, moisturizer, or medicine do you recommend?
- Could hormones, menopause, or androgen deprivation be part of what I feel?
- Who is a sexual-health or pelvic-floor clinician you trust?

How to schedule or learn more

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